

## **PLANNING AND ZONING COMMISSION**

### **MEETING MINUTES**

**SEPTEMBER 4, 2014**

#### **AGENDA**

- 1. Perimeter West PCD, Subarea 2 - Dublin Springs Hospital 7625 Hospital Drive  
14-059AFDP Amended Final Development Plan  
(Tabled 5 – 0)**
- 2. Indian Run Meadows PUD-Shops on Muirfield-Shade on Muirfield  
14-077Z/PDP/FDP 7148 Muirfield Drive  
Rezoning/Preliminary Development Plan/Final Development Plan  
Rezoning/Preliminary Development Plan (Approved 4 – 0)  
Final Development Plan (Approved 4 – 0)**
- 3. Liggett – Cosgray Road Cosgray Road  
14-083INF Informal Review  
(Postponed)**

The Chair, Chris Amorose Groomes, called the meeting to order at 6:30 p.m. and led the Pledge of Allegiance. Other Commission members present were John Hardt, Victoria Newell, Todd Zimmerman, and City Council Representative Amy Salay. Mr. Taylor and Ms. Kramb were absent. City representatives present were Jennifer Readler, Gary Gunderman, Claudia Husak, Tammy Noble-Flading, Alan Perkins, Nicki Martin, and Flora Rogers.

#### **Administrative Business**

##### **Motion and Vote**

Mr. Hardt moved, Ms. Salay seconded, to accept the documents into the record. The vote was as follows: Ms. Newell, yes; Mr. Zimmerman, yes; Ms. Amorose Groomes, yes; Ms. Salay, yes; and Mr. Hardt, yes. (Approved 5 – 0)

##### **Motion and Vote**

Mr. Hardt amended the August 7, 2014 meeting minutes on page 17, 4<sup>th</sup> paragraph from the top, where talking about street names, the last sentence, to change "vote for consistency" to "preferred consistency" because he doesn't get to vote on the matter, the next paragraph after that the last sentence, says "I hope this is not the consensus of the Council", to clarify "that he hoped that removal of the cycle track was not the consensus of the Council", on page 18, top paragraph, near the end to change to "the dimensions labeled in the drawings as varies", and the last page, last paragraph, change to "likely may have caused delays".

Mr. Zimmerman amended page 2, mid-way down, the sentence attributed to him, change the word “a 185 units where” to “when the road network”.

Ms. Amorose Groomes amended page 19, 3<sup>rd</sup> paragraph down, attributed to her, to change “comment” to take “public comment”.

Mr. Hardt moved, Mr. Zimmerman seconded, to accept the August 7, 2014 meeting minutes as amended. The vote was as follows: Ms. Amorose Groomes, yes; Ms. Newell, yes; Ms. Salay, yes; Mr. Zimmerman, yes; and Mr. Hardt, yes. (Approved 5 – 0)

Ms. Amorose Groomes said there are two cases on the agenda this evening. She said Case 3, Liggett Cosgray case was postponed prior to the meeting. She said the Indian Run Meadows case was on the consent agenda and said Case 2 would be heard first as consent and the agenda order will be Case 2, and then 1. She briefly explained the rules and procedures of the Planning and Zoning Commission. [The minutes reflect the order of the published agenda.]

**1. Perimeter West PCD, Subarea 2 - Dublin Springs Hospital 7625 Hospital Drive  
14-059AFDP Amended Final Development Plan**

The Chair, Ms. Amorose Groomes, introduced this application for an amended final development plan to permit a 10-foot, galvanized steel, security fence around the rear portion of the property. The site is located at the southwest corner of the intersection of Perimeter Drive and Hospital Drive. The Commission is the final authority on this application.

Ms. Amorose Groomes swore in anyone intending to address the Commission on this case.

Tammy Noble-Flading said the proposal includes two requests:

1. To increase the amount of area to be fenced in to the rear of the building.
2. To increase the height of the existing fence from a six foot fence to a ten foot fence.

Ms. Noble-Flading said the site is 8.9 acres with frontage on Perimeter Drive and Hospital Drive and is zoned Planned Commercial District, as part of the Perimeter West Planned District, Subarea 2. She said the site contains a 55,000-square-foot building with parking in the center of the site with approximately 115 parking spaces. She said there is a walking path with associated landscaping and patios attributed to the different wings of the facility. She said the focus of this discussion is the existing 6-foot wood privacy fence located to the rear of the building.

Ms. Noble-Flading said the applicant is proposing to increase the fenced area expanding the entire length of the building which is approximately 330 feet. She said it would be located 10 feet further back on the property, than the existing fence, and would expand the entire length of the building. She stated that the fence would have internal sections of fence that created four separate areas of fenced in areas that would provide individual outdoor space for different populations of the facility. She said the proposed location encroaches into a building setback by 10 feet. She said the existing six-foot wood privacy fence will be removed along with the existing stone columns.

Ms. Noble-Flading said the applicant is proposing a 10-foot galvanized black powder coated fence extending the perimeter of the building. She said that Planning has worked with the applicant as well as analyzed the proposal and believes that the extensive height of the proposed fence is not appropriate in an office setting. She said the other issue that they have discussed with the applicant is safety concerns. She said that Planning believes that there are other viable options to ensure safety of the patients. She concluded that the review criteria is not met and is recommending disapproval based on those analyses.

Ms. Amorose Groomes asked if the applicant would state their name for the record.

Brian Zets, Attorney, Isaac Wiles, 2 Miranova Place, Columbus, Ohio, said he is here on behalf of the applicant and has two other representatives from Dublin Springs. He said if they are thinking that they have never allowed a 10 foot fence in the City of Dublin that the answer is that the City of Dublin has never had a facility like Dublin Springs inside the City of Dublin. He said they are unique and what they do is unique, the patients that they serve is unique and based on the uniqueness of their services the patients that they provide services to they believe this application is necessary and should be approved.

Mr. Zets said Dublin Springs Hospital is a 72 bed facility in with 3 wings each housing a different type of patient with various types of disorder, such as substance abuse, self-inflicted harm, and psychiatric care. He said they usually run at a strong occupancy rate usually occupying 62 beds. He said the ratio is one nurse for every four patients and if combined with staff plus nurses that ratio is two staff and/or nurses for every one patient. He said for patients that possess a strong likelihood of harm to themselves the ratio is one to one.

Mr. Zets said the outside component is important to what they do, 80 percent of patients are voluntarily admitted and the other 20 percent is involuntarily admitted from hospitals or "pink slipped" and ordered to attend the facility. He said that the Dublin facility is one of the first 4 facilities that were built in the country and at the time the facility was planned and constructed, their safety needs were not fully known. He said the data shows that the 10 foot fence is the best method to safety secure patients from leaving the facility without properly checking out. He said since the facility has opened 12 people have left the facility, some have walked out of the gate and others have used the stone gazebo to scale the fence.

Mr. Zets said the proposal is to include the entire rear portion of the perimeter to take advantage of the other spaces behind each of the units with security gates in-between the sections so that staff can have access to the areas without having to go through the building. He said the Dublin Police had done an analysis of security report last October which indicated they need to further investigate the requirements of having the fence gates locked. He said that the Fire Department has required that the fence gates not be locked.

Mr. Zets said they are requesting a higher fence that will be located 10 feet beyond the existing fence with internal separation for each wing of the facility. He said the Dublin Police Department asked that the facility investigate an alarm on the gates of the fence and consider changing the type of fence that makes it more difficult to climb and be open, to provide more visibility. He said the fence is an aesthetically pleasing and is less visible than the existing privacy fence. He said the Police suggested making the outdoor furniture more secure to prevent moving it to aid in climbing the fence. He said they are proposing to relocate the fence

10 feet beyond the existing location to separate the fence from the existing gazebo which has also been used to scale the fence.

Mr. Zets said that based on their operations, they believe that the 10-foot fence is the best option for patient safety and for the safety for the Dublin residents. He said sometimes the patients do decide they want to check out on their own and do make it outside the facility and there was one instance where a patient found a bike and was caught riding toward Delaware. He said the fence would alleviate safety concerns and provides needed security for the facility.

Ms. Amorose Groomes invited public comment. [Hearing none] She closed public comment for the Commission discussion to commence.

Ms. Newell asked what options were discussed with the applicant to provide security.

Ms. Noble-Flading said one of the first things they identified was locking the gates so that the fenced in area would be secure. She said they also talked about a fence that would be a more appropriate height but eliminate the columns which is primarily used to scale the fence. She said they also discussed various methods of modifying the gazebo so that patients could not use the building to climb the fence or provide separation between the gazebo and the fence.

Ms. Newell asked if they had talked about using tracking devices on their patients.

Ms. Noble-Flading said they did not discuss tracking devices but that they had discussed providing additional staff that would aid in monitoring the patients when they are in the outdoor area.

Mr. Zimmerman said he had the same questions of how patients are leaving the facility without being observed by staff and concluded that if a patient wants to scale a 10-foot fence they will. He said they said staff is always outside when patients are on the patio and it is difficult to understand how a staff member does not observe the patients climbing the fence.

Mr. Hardt said several questions have been answered, but wondered if Alan Perkins would comment on the locked gate.

Fire Marshall, Alan Perkins, 6200 Eiterman Road, said this facility went through a variance with the Ohio Board of Building Appeals to allow them to go through two different locked doors before exiting the building. He said the Building Code does not permit going through more than one locked door within a building before exiting the building. He said the building meets this requirement but would prevent them from locking the gates. He said this is typical with nursing homes and memory care facilities.

Mr. Hardt said in terms of people being able to evacuate the facility in an emergency, the gates on the fence is seen as part of an egress route and would be possible with the permission from the right authorities.

Fire Marshall Perkins said it would require additional approvals and he would have to review the existing approval to provide further details.

Mr. Hardt said they have had other businesses that had needs that warrant higher fences but have required high aesthetic hurdles such as stone columns and extensive landscaping. He said if he was going to give this request consideration he would require the same things. He said he would want to see that other security measures were pursued, prior to pursuing a 10-foot fence. He said he would not consider the approving a fence that violated the building setback. He said that if the gazebo is contributing to the issues, it should be relocated or removed from the site.

Ms. Salay said she agrees with Mr. Hardt regarding the setback and removing or relocated the gazebo. She said the stone columns were used to help in scaling the fence so they may not be a viable feature for the proposed fence but the fence will need to be heavily landscaped. She also stated that a seven or eight-foot fence should be explored, before proposing a ten-foot fence. She stated that 80 percent were voluntarily committed to the facility and asked for clarification about the security needs of the patients.

Mr. Zets said each patient has to be "checked" out by the clinical psychologist when treatment is finished and the average length of stay is 8 or 9 days and headed toward another outpatient type service.

Ms. Salay asked if they know who might be a flight risk.

Mr. Zets said there is not a good way to determine which patient would be.

Ms. Salay asked how is it that the patients are able to get out with a staff ratio of one to two staff to each patient.

Mr. Zets said they have never not accounted for a patient and the ratio is usually two or three staff members to 10 to 12 patients. He stated that they typically have had issues when patients create distractions that help other patients pursue leaving the facility.

Ms. Salay said that might be an operational issue and not a fence issue. She said she is not able to approve a 10-foot fence until they have pursued all other methods of securing the facility.

Ms. Salay asked if the gates on the exterior of the fence are locked but staff have key card access that would open the gates, would that be acceptable by the building code.

Fire Marshall Perkins stated that staff having access to locked doors by way of key card access is currently a condition of their approvals.

Ms. Amorose Groomes said analyzing the review criteria of an amended final development plan and zoning for this area it appears that this facility is operating with a more incarceration type of component than what was originally approved. She said the reason they previously approved a 6-foot fence in the original application was to prevent children from walking away from a daycare facility or someone accessing a daycare facility. She said it has also been approved for facilities that have elderly patients that may become disoriented and need the security of a fence. She said the Commission has not approved a fence that is intended to prevent patients from escaping. She said this is a big shift in the operations of the facility from what was originally approved.

Ms. Amorose Groomes said the analysis is that the proposal is not consistent with the approved preliminary development plan and not consistent with the area. She said another consideration is the safety of the residents of Dublin and if this facility is perceived as a threat to the general public, a bigger fence is not the correct way to resolve the issue. She said this proposal does not lend itself to the open space consideration and lacks the appropriate landscaping to buffer the fence. She said she would not support a 10-foot fence and furthermore if the citizens of Dublin are at risk, perhaps this was not an appropriate use for the site.

Ms. Newell said she lives very close to this facility and is aware of an occasion where a police helicopter was searching the neighborhoods where they were looking for one of the patients of the facility and that event has occurred on more than one occasion and believes that security is an issue. She said it is alarming as a resident to have police helicopters looking for someone from a facility that is supposed to be there on a voluntary basis.

Ms. Newell said they have not been able to confirm that they will be locking the gates on a proposed 10-foot fence and under the Building Code there are very specific provisions for egress from institutional environments and there might be other modifications they need to make to the interior of the building that might allow them to lock the gates. She said she cannot support a modification of a 10-foot fence if it will not be permitted to be locked. She said she has worked with Police Departments with other projects and if they have stated that they would like visual access into the fence it is because they are monitoring what going on behind the fence.

Ms. Newell said they should consider using tracking devices on patients that are of flight risk. She said it is a common practice done on nursing home facilities those patients wear a simple wrist band or ankle bracelet and for the same reasons that has been stated.

Mr. Zets said he does not believe tracking devices are a viable option for their patients. He said he is not trying to alarm the community that there is an alarming number of patients that have left the facility.

Ms. Amorose Groomes said there have been 12 incidents which she believed is alarming.

Mr. Hardt said he lives in the area and witnessed the helicopters and shares the same concern that when the facility came in he was under the impression that it was a facility for treatment of people who were voluntarily seeking drug dependent treatment and it wasn't clear that there would people that were involuntarily brought to the facility and thought this is a potential issue.

Ms. Amorose Groomes asked if the applicant had specific questions from the Commission to move forward.

Mr. Zets said that the gazebo location is regulated and thought it had to be 50 or 55 feet from the building and the location is where it has to be due to smoking regulation.

Ms. Newell asked if the regulation was an operational regulation.

Mr. Zets said it is a regulation in the Code.

Mr. Zets said they have a unique population and unique needs which warrants the request. He said they are proposing landscaping and the site has a a natural tree line behind the building that runs most of the majority of the length along the property line that provides a natural buffer and reduces the size of the fence.

Mr. Zimmerman he will not support a fence that is located in the building setback.

Ms. Amorose Groomes asked the applicant what they would like to do with their application either proceed with a vote or they could request a tabling to work out some of the issues.

Mr. Zets requested to table this application to have further discussion with staff and the Dublin Police Department.

### **Motion and Vote**

John Hardt moved, Mr. Zimmerman seconded, to table this application at the request of the applicant. The vote was as follows: Ms. Amorose Groomes, yes; Ms. Salay, yes; Ms. Newell, yes; Mr. Zimmerman, yes; and Mr. Hardt, yes. (Tabled 5 – 0)

Ms. Salay said they do appreciate the facility being in the community and it is very important that they are able to provide those services and hearing the comments there are a lot of unanswered questions and options that could be done operationally and aesthetically to have their needs met and be able to continue to be in the community.

Garry Hoyes, Dublin resident and lives at 9347 Rosetta Villa Drive, CEO of Dublin Springs, said he thought there was a misunderstanding of the Commission with the Mental Health Act. He said that even voluntary patients once admitted to the hospital can be evaluated by a psychiatrist who can hold them up to 3 court days to determine their condition. He said they are civil matters and people that are involuntary patients because they are a danger to themselves or others. He said they are the fourth facility built by Springstone and every hospital that has been constructed since the Dublin facility has had a 10-foot fence. He said the staff ratio is at 2 to 1 which includes everyone in the facility along with the employees in the business office and CFO Management type employees with the nursing staff at basically 1 to 1, but that number is split between 3 shifts and having maybe 22 staff members total on hand through the night shift. He said he is happy to work with staff on the fence options and is committed to providing landscaping so that the fence will not be seen.

Ms. Newell recused herself prior to this case introduction, saying her husband represents the homeowners association. [Ms. Newell left the room.]

## **2. Indian Run Meadows PUD-Shops on Muirfield-Shade on Muirfield**

**14-077Z/PDP/FDP**

**7148 Muirfield Drive  
Rezoning/Preliminary Development Plan/Final Development Plan**

The Chair, Ms. Amorose Groomes, introduced this application for a request for a revision to the development text to permit up to 1,680 square feet of outdoor patio area in front of an existing restaurant within the Shops on Muirfield. The application also includes all final design details of the proposed patio areas. The site is located within the Indian Run Meadows Planned Unit Development on the east side of Avery-Muirfield Drive approximately 500 feet north of the intersection with Tara Hill Drive. Two motions are required, one for the rezoning and preliminary development plan and one for the Final Development Plan. The Commission will forward their recommendation to City Council for the rezoning/preliminary development plan. The Commission is the final authority on the final development plan, for which we will need to swear-in.

The Chair swore in anyone intending to address the Commission on this case.

Ms. Amorose Groomes stated this case was on the Consent Agenda; therefore, a presentation was not needed.

Ms. Amorose Groomes asked if there was anyone in the general public wanted to speak to this application.

Thomas McCash, 55 South High Street, Dublin, said he is representing adjoining neighbors and not the homeowners association, but is a member of the homeowners association. He said he present for the original rezoning application for the adjoining neighbors and stated they have worked with the applicant on this use of the patio. He said he believes the text actually would allow this without a rezoning, but they are not in opposition to it as long as they are following the same conditions that were there for Mary Kelley's.

**Motion and Vote#1**

John Hardt moved, Mr. Zimmerman seconded, to recommend approval to City Council for this Rezoning/Preliminary Development Plan with no conditions. The vote was as follows: Ms. Salay, yes; Ms. Amorose Groomes, yes; Mr. Zimmerman, yes; and Mr. Hardt, yes. (Approved 4 – 0)

**Motion and Vote#2**

Ms. Amorose Groomes asked the applicant if they agreed with the conditions.

Jill Tangeman, Attorney, 52 East Gay Street, representing the applicant, responded affirmatively.

John Hardt moved, Mr. Zimmerman seconded, to approve this Final Development Plan with two conditions:

- 1) That all outdoor furniture be stored out of sight from November 1st to April 1st unless the furniture is set-up for use, not covered in any way and weather conditions are appropriate for use; and
- 2) That the patio fence be removed if the restaurant discontinues use of the space.



The vote was as follows: Ms. Amorose Groomes, yes; Ms. Salay, yes; Mr. Zimmerman, yes; and Mr. Hardt, yes. (Approved 4 – 0)

**3. Liggett – Cosgray Road  
14-083INF**

**Cosgray Road  
Informal Review**

The Chair Chris Amorose Groomes said this case was postponed, prior to the meeting.

**Communications**

Ms. Amorose Groomes asked if there were any communications to be relayed and discussed.

Ms. Husak said in the packet for this meeting was the rest of the Bridge Street Code for this meeting and asked that they keep that information for the next meeting and said that Jenny Rauch and Rachel Ray will be present at that meeting.

Ms. Husak said she will send out an email next week to look at October to see if there are other dates where a majority of the Commission would be available to have special meetings to keep working on the Code.

Ms. Amorose Groomes asked that potential dates are included in the email so they can give feedback and avoid any conflicts in the room.

Mr. Hardt asked about the text provided for the next meeting that when Council voted on the Code that Cement Fiber Siding can only be used as a secondary material because when the Commission was contemplating that there were developers present that requested not to make that change.

Ms. Husak said once Council voted on the change there was a communication to developers and they invited Mark Ford to be present at the next meeting to present back ground information for Bridge Street applications.

Ms. Salay said that she explained that the Commission wanted to consider building materials as part of the whole Bridge Street District. She said that Council felt very strongly that they wanted to have cement siding limited and have heard the same concerns from developers.

Mr. Hardt said that his firm is working on a project that is using cement product that looks like red wood planks that is beautiful.

Ms. Husak said they are putting the training opportunity in the packet for Council to attend the presentation or having Mr. Ford attend a work session or council meeting to educate them on the options.

Mr. Zimmerman said there is a house on South High Street that is using a fiberglass shingle that looks just like slate and is really nice.

**Commission Roundtable Discussion**

Ms. Amorose Groomes asked if there were any roundtable issues to be discussed. [Hearing none]

The meeting was adjourned at 7:47 p.m.

As approved by the Planning and Zoning Commission on October 21, 2014.